

LCID

State of North Carolina
Department of Environment and Natural Resources
Division of Waste Management
LAND CLEARING AND INERT DEBRIS LANDFILL

Received 8/1/12
Reviewed 8/1/12

Facility Annual Report
For the period of JULY 1, 2011-JUNE 30, 2012

If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist. According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2012 and a copy of this report must be sent to the County Manager of each county from which waste was received.

Facility Name: Winfree Road Landfill Inc. Permit: 41I-LCID ID: P1071

Facility Website (URL): _____

Physical Address		Mailing Address	
Street 1:	<u>7965 Winfree Road</u>	Street 1:	<u>PO Box 603</u>
Street 2:	_____	Street 2:	_____
City:	<u>Summerfield</u>	City:	<u>Summerfield</u>
State:	<u>North Carolina</u>	State:	<u>North Carolina</u>
Zip:	<u>27358</u>	Zip:	<u>27358</u>

Facility Contact: Primary		Facility Contact: Secondary	
Name:	<u>Jerry Friddle</u>	Name:	<u>Jerry Wray</u>
Phone:	<u>(336) 327-0252</u>	Phone:	<u>(336) 684-5803</u>
Fax:	_____	Fax:	<u>(336) 298-4690</u>
Email:	_____	Email:	_____

1. Tipping Fee: \$ 30.00 per load
 Tipping Fee: \$ 45.00 per load
 Tipping Fee: \$ 55.00 per load

2. Estimate the amount of waste taken in an average week at this facility? 10 cubic yards

3. How many weeks did you operate this year? 52

4. What are the hours/days of operation for this facility? Monday - Friday 7:00am - 5:00pm

5. What is the acreage of the footprint of the waste? 22.5 Acre(s)

***According to (G.S. 130A-309.09D(b))

This report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: Jerry W Friddle Date: 7-31-12

Name: Jerry W Friddle Title: President

Phone Number: (336) 327-0252 Email: _____

Facility Name: Winfree Road Landfill Inc.

Permit: 41I-LCID-

Address: 7965 Winfree Road

City: Summerfield

State: North Carolina

Zip: 27358

Person completing Assessment: Jerry Wray

Date: 7-31-12

Phone Number: (336) 684-5803 Fax: (336) 298-4690

Email:

Instructions:

Please indicate either Yes or No for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste?

☒ Yes ☐ No

If Yes, how many? 7

What are the three closest distances from the *Edge of Waste*? 350 Feet 600 Feet 800 Feet

2. Are there Potable Wells Within 1,500 feet of the Edge of Waste?

☒ Yes ☐ No

If Yes, how many? 7

What are the three closest distances from the *Edge of Waste*? 325 Feet 600 Feet 800 Feet

3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste?

☐ Yes ☒ No

If Yes, how many?

What are the three closest distances from the *Edge of Waste*? Feet Feet Feet

4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste?

☐ Yes ☒ No

If Yes, how many?

What are the three closest distances from the *Edge of Waste*? Feet Feet Feet

Please list the names of the water bodies:

5. Is Public Water Available Within 1,500 feet of the Edge of Waste?

☐ Yes ☒ No

If Yes, how many of the Residential Dwellings noted above are connected?

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)?

☐ Yes ☐ No

7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)?

☐ Yes ☐ No

8. Is there groundwater remediation taking place on site?

☒ Yes ☐ No

If Yes, what is the specific remedial technology used? Retainage Ponds

Comments